STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

RECEIVED

PLEASE PRINT

JUL 2 4 2018

· ·	1 000 0
1. Name of Lobbyist(s) EVELIN AISSA	NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's partnership, firm or corporation, if any:	Mai rilli i i i i i i i i i i i i i i i i
PEACHINE HIGHER NH	
(Name of partnership, firm or corporation)	
40 N MAIN STREET SUITE 204 COLORD Business Address: (Street) (Town/City)	(State) (Zip Code)
(CP) 715 9690 (Fax) e-mi	ail evelynereachinglisternhos
111. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).	
☐ All reportable transactions occurring in the months prior to the reporting date relative to the following client:	
(Full Name of Client as it appears on the Lobbyist Registration	n Form)
OR	
All reportable transactions by the lobbyist (including the lobbyist's family), unrelated to any particular client.	or the lobbying firm listed below which are
	, 2018 🗡 /1/18 10 6/30/18
·	9 30, 2019
V. There have been no fees received and no reportable transactions of this box is checked, complete just this form and submit it to the Secretary of S. Concord, NH 03301.	made since the last report. X tate's Office, State House, Room 204,
VI. Check if additional reports are attached:	
\square If you have received fees or made expenditures, you must file Addendum A	
☐ If you have paid an honorarium or reimbursed expenses, you must file Add Expense Reimbursement	endum B- Report of Honorariums or
☐ If you, your firm, or your family has made political contributions, you must	file Addendum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist 1 have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or a and complete to the best of my knowledge and belief.	
<u>+-2</u>	<u>4.18</u> (Date)
(Signature) of Hobbyist)	(Date)
(Print Name of lobbyist)	